



**VERIFICATION OF LICENSURE FOR
RADIATION TECHNOLOGIST OR TECHNICIAN**

The Delaware Radiation Control Regulations require state certification of radiation technologists and technicians who administer radiation to patients in the healing arts. Licensed practitioners such as physicians, dentists, veterinarians, and certified dental assistants are exempt from this certification requirement.

Complete the top portion of this form with name, social security number, date of birth, and Delaware certification number of the individual. Please allow three weeks for processing. Incomplete forms will be returned. **Fax this form with your request on company letterhead to 302-739-3839**, or mail to the following address:

Delaware Division of Public Health
Office of Radiation Control
417 Federal Street
Dover, DE 19901

Name: _____

Social Security Number: _____

Date of Birth: _____ Certification # _____

For office use, only

Status: ☐ Current Expiration Date: _____

☐ Expired/Terminated

☐ No record of this individual

Verified by: _____

Date: _____

Board Seal

To download forms or obtain a copy of the regulations, please visit our web site
at <http://www.dhss.delaware.gov/dhss/dph/hsp/orc.html>